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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/731,974			ing Date 10/2003	To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY				HER THAN	
\vdash	FOR		NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)	OR	RATE (\$)	FEE (\$).	
	BASIC FEE		N/A		N/A		N/A	1 == (+)	1	N/A`	, == (*)	
一	(37 CFR 1.16(a), (b), SEARCH FEE	or (c))	N/A		AUA		A1/A		1	11/0		
H	(37 CFR 1.18(k), (i), (ii), (iii)		N/A		N/A		N/A		•	N/A		
	(37 CFR 1.16(o), (p),		N/A		N/A		N/A			N/A		
(37	CFR 1.16(i))		minus 20 =		•		X \$ =		OR	X \$ =		
	EPENDENT CLAIM CFR 1.16(h))	IS	minus 3 = *				x \$ =			x \$ =		
	APPLICATION SIZE (37 CFR 1.16(s))	shee is \$2 addit	If the specification and drawings of sheets of paper, the application s is \$250 (\$125 for small entity) for additional 50 sheets or fraction th 35 U.S.C. 41(a)(1)(G) and 37 CF									
	MULTIPLE DEPEN	IDENT CLAIM PR	7 CFR 1.16(j))]								
• If	* If the difference in column 1 is less than zero, enter *0" in column 2.]	TOTAL		
APPLICATION AS AMENDED – PART II (Column 1) (Column 2) (Column 3)							SMALL ENTITY OR				OTHER THAN SMALL ENTITY	
AMENDMENT	01/22/2007	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(i))	• 11	Minus	 20	= 0	1	x \$ =		OR	X \$50=	0	
	Independent (37 CFR 1.16(h))	٠ 9	Minus	···9	= 0		x \$ =		OR	X \$200=	0	
	Application Size Fee (37 CFR 1.16(s))											
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
Γ							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0	
		(Column 1)		(Column 2)	(Column 3)							
È	9-6.07	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.18(i))	· 6	Minus	-20			x \$ =		OR	x \$ =		
DM	Independent (37 CFR 1.16(h))	٠ 6	Minus	9	=		x \$ =		OR	X \$ =		
AMENDME	Application Size Fee (37 CFR 1.16(s))											
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

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